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NOV 28 2005

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7590

08/25/2005

Ansel M. Schwartz
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 Pittsburgh, PA 15213

11/29/2005 MAHMED2 00000032 10005255

01 FC:2501 700.00 OP
 02 FC:1504 300.00 OP

(3) FEE(S) PAYMENT

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/005,255	11/02/2001	Irwin Kotovsky	K0T0V-1	1332

TITLE OF INVENTION: METHOD AND APPARATUS FOR LIGHTING WITH A ONE-PIECE PANEL HAVING A PLURALITY OF HOLES

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

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Tracey L. Klaas

(Depositor's name)

Tracey L. Klaas

(Signature)

November 23, 2005

(Date)

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	11/25/2005
EXAMINER		ART UNIT	CLASS-SUBCLASS		
WARD, JOHN A		2875	362-147000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Ansel M. Schwartz

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

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Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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Issue Fee
 Publication Fee (No small entity discount permitted)
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 A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-0737 (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Ansel Schwartz

Typed or printed name Ansel M. Schwartz

Date

11/23/05

Registration No. 30,587

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